	Effective October 1, 2003												
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY													
TOTAL CLAIMS			22				ſ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20=		• 2			X\$ 9=		OR	X\$18=	36	
INDEPENDENT CLAIMS			3 minus 3 =		· U		ı	X43=		OR	X86=	0	
MULTIPLE DEPENDENT CLAIM PRESENT							ı	+145=			+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR OR	TOTAL	90 b	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL E	THAN	70,
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FÆE	17
	Total	· 20	Minus	. 0	33	-		X\$ 9=		OR	X\$18=		3/.
	Independent	· 3	Minus	***	3/		I	X43=		OR	X86≃		حرک
	FIRST,PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM	لىلى	I	+145=		OR	+290=		7
//	-06-04	2 (Coh.ma 4)		(Colore	(1)	(Column 2)	A	TOTAL DDIT. FEE		00	TOTAL ADDIT, FEE	5	CK
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER OUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.20	Minus	• 1	22	188		X\$ 9≃		OR	X\$18=		
	Independent	• 3	Minus	780	3	-0		X43=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	7	
						<b>N</b>	L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		1
		(Calumn_1)		(Colu	mn 2)	(Column 3)	•						1
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	80		•	[	X\$ 9=		OR	X\$18=		
	Independent		Minus	***				X43=		OR	X86=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		1
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3.										OR	TOTAL		1
	'il the 'Highest Nu	mber Previously Pa nber Previously Pa	aid For IN TH	IS SPACE	is less tha	on 3, enter "3."		DDIT. FEE	propriate bo		ADDIT. FEE Bumn 1.		

Application or Docket Number